

**PERALTA COMMUNITY COLLEGE DISTRICT  
COUNSELOR PERFORMANCE OBSERVATION  
(By TRC / Evaluation Committee Member)**

**Name of Counselor**

**Date**

**Semester**

**Name of Observer**

**College**

The following information is requested by the TRC / Evaluation Committee:

1. Counseling topic: *(check all relevant topics)*

*Note: No single counselor is expected to perform all of these tasks in any single observation period and it is understood that some counselors provide specialized services.*

- a. Program/planning/scheduling of classes/major
- b. Degree/Certificate evaluation
- c. Probation progress counseling
- d. Transfer counseling
- e. Document preparation
- f. Career planning
- g. Personal counseling
- h. Information on other college services
- i. Referral to community resources, etc.
- j. Withdrawal from college
- k. Other *(specify)*

2. Please check the appropriate line to indicate which items were observed during the session.

Check if Observed		Notes and Comments Illustrating the Observation
<input type="checkbox"/>	The counselor made the student feel comfortable and was attentive to their concerns	
<input type="checkbox"/>	The counselor helped the student to develop and clarify their own goals and take responsibility for working towards solutions.	
<input type="checkbox"/>	The counselor provided the student with information on course requirements, prerequisites, etc., related to the student's educational goals, career plans, interests, and/or abilities.	
<input type="checkbox"/>	The counselor demonstrated adequate knowledge about degree, certificate, course, and/or transfer requirements.	
<input type="checkbox"/>	The counselor informed the student of at least one of the college's services, such as tutoring, financial aid, orientation, assessment, library services, EOPS, PACE, DSPS, etc.	

Please comment:

3. In your opinion, what in the counseling/ advising session appeared to be most helpful to the student?

4. In what way could the counselor have been more helpful or effective to the student?

5. Other observations:

Check if Applicable	The counselor.....	Notes and Comments Illustrating the Observation
	Assumes share of department/division responsibilities	
	Attends scheduled meetings, contributes, and participates in governance	
	Participates in shared governance system; chairs/serves on college/district committees	
	Works cooperatively with other faculty, administrators, staff and students.	
	Handles conflict/stress situations appropriately.	
	Keeps office hours and is accessible to students.	
	Keeps current in the discipline.	
	Performs and serves the college well.	

6. Overall performance rating:

**Superior** – *surpasses requirements; exceeds expectations*

**Satisfactory** – *meets all standards of excellence as described in the policy*

**Below Standards** – *does not consistently meet requirements*

**Unsatisfactory** – *does not meet requirements; ineffective*

**Observer:**

**Date:**

**Evaluee:**

**Date:**

*The evaluee's signature on this form does not constitute acceptance of this evaluation. The evaluee has the right to append their own written comments.*

